

**COMBINED DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION  
(Page 1 )**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**DISPLAY SYSTEM AND METHOD**

the specification of which

☒ is attached hereto

☐ was filed on  
International Application No.  
(if applicable).

as United States Patent Application No. or PCT  
and was amended on

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b), of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designates at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed:

<u>Country</u>	<u>Application No</u>	<u>Filed (Day/Mo./Yr.)</u>	<u>Priority Claimed</u> (Yes unless box is checked)
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

**COMBINED DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION  
(Page 2 )**

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below

<u>Application No</u>	<u>Filed (Day/Mo./Yr.)</u>
<b>60/469,496</b>	<b>09 May 2003</b>
<b>60/515,322</b>	<b>28 October 2003</b>

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

<u>Application No.</u>	<u>Filed (Day/Mo./Yr.)</u>	<u>Status (Patented, Pending, Abandoned)</u>
------------------------	----------------------------	--

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (list name and registration numbers).

**Lawrence Rosenthal, Reg. No. 24,377**  
**Steven B. Pokotilow, Reg. No. 26,405**  
**James J. DeCarlo, Reg. No. 36,120**  
**Matthew W. Siegal, Reg. No. 32,941**  
**David L. Schaeffer, Reg. No. 32,716**  
**Ian G. DiBernardo, Reg. No. 40,991**

**COMBINED DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION  
(Page 3 )**

Send Correspondence to:

**James J. DeCarlo  
STROOCK & STROOCK & LAVAN LLP  
180 Maiden Lane  
New York, New York 10038**

Direct Telephone Calls to: (name and telephone number)

**James J. DeCarlo  
(212) 806-5400**

Full Name of Sole or First Inventor: **John Connelly**  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Citizen/Subject of: **United States of America**  
Residence: **156 Dufour Street**  
**Santa Cruz, CA 95060**  
Post Office Address: **156 Dufour Street**  
**Santa Cruz, CA 95060**

Full Name of Second Inventor, if any: **Linda Jane Bennett**  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Citizen/Subject of: **United States of America**  
Residence: **25 West 13th Street, Apt. 5L North**  
**New York, New York 10011**  
Post Office Address: **25 West 13th Street, Apt. 5L North**  
**New York, New York 10011**

**COMBINED DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION  
(Page 4 )**

Full Name of Third Inventor, if any Qi Lu

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Citizen/Subject of: United States of America

Residence: 20847 Russell Lane  
Saratoga, California 95070

Post Office Address: 20847 Russell Lane  
Saratoga, California 95070

Full Name of Fourth Inventor, if any Justin Everett-Church

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Citizen/Subject of: United States of America

Residence: 43551 Mission Blvd #104  
Fremont, CA 94539

Post Office Address: 43551 Mission Blvd #104  
Fremont, CA 94539

Full Name of Fifth Inventor, if any Steven Milano

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Citizen/Subject of: United States of America

Residence: 1450 Seventh Avenue #6  
San Francisco, CA 94122

Post Office Address: 1450 Seventh Avenue #6  
San Francisco, CA 94122

**COMBINED DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION  
(Page 5 )**

Full Name of Sixth Inventor, if any David Shen

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Citizen/Subject of: United States of America

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full Name of Seventh Inventor, if any \_\_\_\_\_

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Citizen/Subject of: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full Name of Eighth Inventor, if any \_\_\_\_\_

Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Citizen/Subject of: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_